

01/02/01
USPTO
10683PATENT APPLICATION
TRANSMITTAL

(only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. KEL-2064US-
JEL/MAS
(10026327)

34

First Named Inventor or Application Identifier

Lori WILSON

Express Mail Label No.

PTO

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

10683

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. Fee Transmittal Form (*attached hereto in duplicate*)

2. Specification [Total Pages 30] (*Preferred arrangement set forth below*)

- Descriptive Title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (*if filed*)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

3. Drawing(s)(35 USC 113) [Total Sheets 4]
4. Oath or Declaration

- a. UNSIGNED
- b. Copy from a prior application (37 CFR 1.63(d)) (*for continuation/divisional check boxes 5 and 16*)
 - i. Deletion of Inventor(s)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

5. Incorporation by Reference (*useable if Box 4b is checked*)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

16. If a CONTINUING APPLICATION, *check appropriate box and supply the requisite information:*
 Continuation Divisional Continuation-in-Part (CIP) of prior application No: _____

17. For this application, please cancel original Claims _____ of the prior application before calculating the filing fee.

18. CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Label ----- or Correspondence Address below

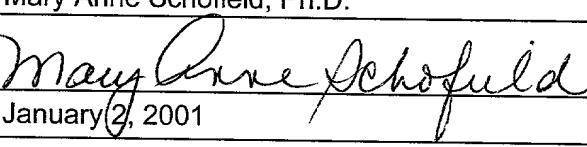
Name: Mary Anne Schofield, Ph.D.
 Address: Fulbright & Jaworski L.L.P.
 801 Pennsylvania Avenue, N.W.
 Washington, D.C. 20004

19. TELEPHONE CONTACT

Please direct all telephone calls or telefaxes to Mary Anne Schofield at:

Telephone: (202) 662-4584 Fax: (202) 662-4643

19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Mary Anne Schofield, Ph.D.	Reg. No. 36,669
SIGNATURE		
DATE	January 2, 2001	